

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005139

Entity Name: LOR FOUNDATION, INC.

FILED
Mar 21, 2009
Secretary of State

Current Principal Place of Business:

8481 CROOM RITAL ROAD
BROOKSVILLE, FL 34602

New Principal Place of Business:

Current Mailing Address:

8481 CROOM RITAL ROAD
BROOKSVILLE, FL 34602

New Mailing Address:

8485 CROOM RITAL RD
BROOKSVILLE, FL 34602

FEI Number: 43-2082144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSMAN, ALAN S ESQ.
1245 COURT STREET, SUITE 102
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LAROSA, SR, WILLIAM M.D
Address: 8481 CROOM RITAL ROAD
City-St-Zip: BROOKSVILLE, FL 34602

Title: D () Delete
Name: LAROSA, DOROTHY
Address: 8481 CROOM RITAL ROAD
City-St-Zip: BROOKSVILLE, FL 34602

Title: D () Delete
Name: LAROSA, STEPHEN C
Address: 8481 CROOM RITAL ROAD
City-St-Zip: BROOKSVILLE, FL 34602

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: O () Change (X) Addition
Name: COOPER, SUSAN LAROSA
Address: 8485 CROOM RITAL RD
City-St-Zip: BROOKSVILLE, FL 34602

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN LAROSA COOPER

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03/21/2009

Electronic Signature of Signing Officer or Director

Date